115-5-19

STATEMENT OF CLAIMANT FORM

FOR

APR - 7

STOCKPOND USE AMENDMENT

CLAIM BEING AMENDED

SUPERIOR COURT OF MARICOPA COUNTY

1.	Claimant Name: BLM - Safford District								
	Claimant Address: 425 E. 4th St. City Safford								
	State: AZ Zip Code 85546 Telephone 602-5								
		7040							
2.	Basis of Claim:								
	A. Appropriation Right acquired prior to June 12, 1919. 1974 Water Rights	Registration Act							
	Registry No.								
	B. Appropriation Right acquired after June 12, 1919. Application No.								
	Permit No, or Certificate of Water Right No								
	C. Right acquired through the 1977 Stockponds Registration Act. Claim No								
	D. Decreed water right. Principal litigants, court, date and case no.								
	E. Other, describe:								
3.	Claimed Priority Date: (month/day/year)								
	그 사람들은 그리고 그 사람들이 가지 않는 것이 없는 것이 되는 것이 없는 것이 없는 것이 없었다.	i ng pair							
4.	Source of Water:								
	A. Stream, wash or arroyo: name,tributary to								
	B. Is water supplied from a source other than natural channel flow into the stockpond?								
	☐ Yes, ☐ No If yes, describe:								
-									
5.									
5.	Legal description of the location of the stockpond: (attach additional sheet if required)	· · · · · · · · · · · · · · · · · · ·							
	Legal description of the location of the stockpond: (attach additional sheet if required) NE¼, NE¼, SE¼, Section 19, Township 6 增/S, Range 19 E/图								
5. 6.	Legal description of the location of the stockpond: (attach additional sheet if required)								
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6.	Legal description of the location of the stockpond: (attach additional sheet if required) NE¼, NE¼, Section 19, Township 6 增/S, Range 19 E/图 If there are other uses supplied by the stockpond or its water source, describe: Description of the Stockpond:								
6.	Legal description of the location of the stockpond: (attach additional sheet if required) NEW, NEW, SEW, Section 19, Township 6 4/5, Range 19 E/4 If there are other uses supplied by the stockpond or its water source, describe: Description of the Stockpond: A. Name or other designation:								
6.	Legal description of the location of the stockpond: (attach additional sheet if required) NE 14, NE 14, SE 14, Section 19, Township 6 14/S, Range 19 E/19 If there are other uses supplied by the stockpond or its water source, describe: Description of the Stockpond: A. Name or other designation: B. Dam specifications:								
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6.	Legal description of the location of the stockpond: (attach additional sheet if required) NEW, SEW, Section 19, Township 6 \$\frac{19}{2}\$ Range 19 E/\$\frac{19}{2}\$ If there are other uses supplied by the stockpond or its water source, describe: Description of the Stockpond: A. Name or other designation: B. Dam specifications: 1) Date construction began,, and ended 2) Height, ft. 3) Does dam have an outlet structure other than spillway? \[\text{Yes} \] No C. Reservoir behind dam:								
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6.	Legal description of the location of the stockpond: (attach additional sheet if required) NE 1/4, NE 1/4, SE 1/4, Section 19, Township 6 28/5, Range 19 E/29 If there are other uses supplied by the stockpond or its water source, describe: Description of the Stockpond: A. Name or other designation: B. Dam specifications: 1) Date construction began,, and ended 2) Height, ft. 3) Does dam have an outlet structure other than spillway?								
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6.	Legal description of the location of the stockpond: (attach additional sheet if required) NE 1/4, NE 1/4, SE 1/4, Section 19, Township 6 28/5, Range 19 E/29 If there are other uses supplied by the stockpond or its water source, describe: Description of the Stockpond: A. Name or other designation: B. Dam specifications: 1) Date construction began,, and ended 2) Height, ft. 3) Does dam have an outlet structure other than spillway?								

8.	Number and kind of livestock or w	ildlife watered by this stockpond:
		, for months per year.
9.	Attach 'photographs, maps or sk conveyance system and other point	etches necessary to show the location of the stockpond(s) and any c(s) of diversion.
10.		tative from the Department of Water Resources to inspect the stockpond owing will grant permission to enter your property for the purpose of
11.	representative, are there any spec specified person?	esentative of the Department to contact you as the claimant or your ial instructions regarding time of day or address to aid in locating the
12.	Additional comments:	
	(attach additional sheet if required	
13.	Mail form(s) to: Department of W	ater Resources, P.O. Box 2920, Phoenix, Arizona 85062.
	Notarized Statement: # (We), BLM - Saffor the claimant(s) named in this claimant contained and statements made he complete.	District sim, do hereby certify under penalty of perjury, that the information erein are to the best of my(our) knowledge and belief true, correct and Della Multiple For BLM
	(seal)	
	July 12, 1992 My Commission Expires:	Seurde M. Lholys Notary Public
		or,Authorized Personnel of the Department of Water Resources

ARIZONA WATER COMMISSION CENTRAL SECURITY BUILDING 222 N. Central Ave. Suite 550 Phoenix, Arizona 85004 602-255-1581

STATEMENT	OF	CLA	TMAN'	T.

(Leave Blank)

RELATIVE RIGHTS TO THE UNATERS OF THE SAN PEDRO	JSE OF) RIVER AND ITS)	File No. // Filed: /-4-82- (date)	at <u>P / M</u> (time)	
claimant shall present subject waters. All applications applications are submitted as the state of the state	nt has enclosed with the as required, the particul plicable portions must be ted for each source or po commingled prior to use. map of equal standard shathe map the particulars otion.	ars of his claid completed. A int of diversion A map publish the submitted	m of right to the separate Statement of public water ned by the United Statement with this Statement	of ates it
	e space is required, use			
1. Name of Claimant:	U.S.D.T., Bureau of Land (Last)	Management, Ar (First)	izona State Office (1	4.I.)
2400 Valley Bank Cente	er, Phoenix, Arizona 85073 , City, State, Zip)	3	(602) 261-3141	
			and the weather are a second and the contract of the contract	A Section of the second section of the
State the nature of supporting document	of the right or use on whitetion)	ich claim is ba	sed: (indicate; an	d attach
A. Right to surf Indicate regi Registration	Tace water initiated by be stry number if previously Act N/A	eneficial use p y submitted und	rior to June 12, 19 er Water Rights	19.
B. Court Decreed	l Water Right. Cite Titl	e and Date of C	ase _{N/A}	6 y 6 / 4 / 8 / 8 / 1
C.X Application f	For Permit to Appropriate No.(see explanatory) Perm No. No.	Water filed.	State Land Departme , Certificat	nt e of
No. N/A		State Land De	partment Application	n :
EOther. Desc				11176-1 (1746) 48 - 48 - 49 - 49 - 49 - 49 - 49 - 49 -
3. A. Date of init	iation of right: 5/11/1 (Month/D	981 Pay/Year)		
	distriction of the control of the co		10/1969 •	
	irst used for beneficial	purposes: 1/ (Mon	th/Day/Year)	
B. Date water f	NI - 2007 - 124 6-17 2 5-2 10 10 10 10 10 10 10 10 10 10 10 10 10	(Mon	th/Day/Year)	
B. Date water for the state of	irst used for beneficial	(Mon of use:	th/Day/Year) y Month/Day	
B. Date water for the second s	irst used for beneficial mount and annual period of Amount ac.ft./gallons	(Monof use: <u>Month/Da</u> From	th/Day/Year) y <u>Month/Day</u> to	
B. Date water for the state of	irst used for beneficial mount and annual period of Amount ac.ft./gallons ac.ft./gallons	(Monof use: Month/Da From From	th/Day/Year) y Month/Day to to	
B. Date water for the state of	irst used for beneficial mount and annual period of Amount ac.ft./gallons ac.ft./gallons ac.ft./gallons	(Monof use: Month/Da From From From	th/Day/Year) y Month/Day to to to	
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B. Date water for the state of	mount and annual period of Amount ac.ft./gallons	(Monof use: Month/Da From 1/1	th/Day/Year) y	
B. Date water for the state of	mount and annual period of Amount ac.ft./gallons	(Monof use: Month/Da From From From From From From From Fro	th/Day/Year) y	
B. Date water for the state of	mount and annual period of Amount ac.ft./gallons	(Monof use: Month/Da From From From From From From From Fro	th/Day/Year) y	on map)
B. Date water for the state of	mount and annual period of Amount ac.ft./gallons	(Monof use: Month/Da From From From From From From From Fro	th/Day/Year) y Month/Day to	on map) F Acres.
B. Date water for the state of	mount and annual period of Amount ac.ft./gallons rigation purposes, descr	(Monof use: Month/Da From From From From From From From Fro	th/Day/Year) y Month/Day to	·····································
B. Date water for the state of	mount and annual period of Amount ac.ft./gallons rigation purposes, descr	(Monof use: Month/Da From From From From From From From Fro	y Month/Day to	E Acres.
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5.	A. (3) Indicate kind of crops cultivated: N/A
		Character of soil:
	B.	If for domestic purposes, number of persons: N/A, or families:
	c.	If for stockwater purposes, number and kind of stock watered: N/A
Magairtí		
	D.	If for municipal purposes, population to be served, and estimate of future requirements: N/A
	Ε.	If for power purposes, describe type of plant and capacity: N/A
	F	If for mining purposes, describe purpose of use, location and character of the mine(s) to be served: N/A
	G.	If for recreational purposes, describe: Aesthetic value(sight and sound),
		wading, swimming, and fishing.
	н.	If for wildlife purposes, including fish, describe: Round-tailed chub, Spike
	I.	If for other purposes, describe:Addt'1. Wildlife:Bighorn sheep, white and mule
		deer, javalina, Coatimundi, mtn. lion, Grey fox, bobcat, game & non-game birds.
6.	Α.	Direct source of public water diverted: AravaipaCk. tributary to San Pedro River on the San Pedro watershed.
	В.	Point of Diversion (indicate on map): NW ¼ NW ¼, Section 19 States and Meridian, County Pinal Ownership United States
	c.	Place of use (indicate on map) See Explanatory 4, Section N/A Township N/A (N/S), Range N/A (E/W), Gila and Salt River Base and Meridian, County Pinal Ownership United States
7.	State	all other sources of water supply not described in Question 6 of this form
	Α.	Type of Source: N/A
	В.	Location of Source (indicate on map): N/A & Section
		Location of Source (indicate on map): N/A & 4, Section Township (N/S), Range (E/W), Gila and Salt River Base and Meridian, County Ownership
	С.	If other source is well, list following:
Ž.,		Date well construction began: N/A; Date well place in use: N/A (Month/Day/Year) (Month/Day/Year)
	(2	
		Location (10 acre subdivision) (indicate on map): N/A ½ ½ ½ Section , Township (N/S); Range (E/W); Gila and Salt River Base Meridian, County of
	(3)	
	(4	State whether free flowing or pump: N/A . If pump, list type of pump and capacity:
	(5)	
	(6)) Depth to water: <u>N/A</u> ft. (Static Level)
	(7	Annual amount pumped, or otherwise extracted: N/A Ac.Ft./Gallons
) State purpose of use: N/A
Autoria) Indicate annual period of use: N/A to
8. T		(Month/Day) (Month/Day) r storage reservoir and/or diverting works:
		Location (indicate on map): N/A 4 1 Section
		Township (N/S), Range (E/W), Gila and Salt River Baseand Meridian, County Ownership
		Name of storage reservoir and/or diverting works (if known): N/A
	C.	Maximum capacity: N/A Ac.Ft.
	×D.	Maximum depth of water: N/A ft.

4	· 사람들은 사람들은 사람들은 사람들은 사람들이 되는 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은
8.	E.(1) Year construction began; N/A.
	(2) Year construction completed N/A
	(3) Date water first stored: N/A (Month/Year).
	F. If dam, list following:
	(1) Construction material: N/A
i dina	(2) Maximum Length: Top N/A ft.; Bottom ft.
	(3) Maximum Width: Top N/A ft.; Bottom ft.
	(4) Maximum Height: N/A ft.
	G. If diverting works, describe: N/A
9.	Distribution works:
	A. If ditch or canal:
4.	(1) Date construction began: N/A
	(Month/Day/Year)
	Date construction completed: N/A
	(Month/Day/Year)
	(2) Length of ditch or canal to first place of use: N/A ft., total length of ditch or canal: N/A ft.
	(3) Top width: N/A ft.; Bottom width: ft.
	(4) Grade (slope) of ditch: N/A
	. (5) If ditch or canal owned and/or operated by an association or company or such other entity, list name of association or company or such other entity: N/A
	B. If pipeline:
	(1) Type: N/A (i.e., aluminum, steel, etc.)
	(2) Diameter: N/A inches
	(3) Length of pipeline to first place of use: N/A ft. and total length
	or pipeline:
(4) (3) (5) (5)	(4) Grade (slope) of pipeline:N/A
	C. If other, describe: N/A
10.	Enlargement(s) of storage reservoir and/or diverting and/or distributing works
	A. Date begun: N/A
900-2014 1	(Month/Day/Year)
	Date completed: N/A (Month/Day/Year)
	B. Describe details of enlargement(s): N/A
	C. Dimensions of works as originally constructed and accordance with
	C: Dimensions of works as originally constructed and as enlarged: N/A
	<u>Explanatory</u>
6A.	The entire length of Aravaipa Creek contained within the Aravaipa Canyon Primitive
	Area is claimed. The location for the constitution of the constitu
	Area is claimed. The location for the creek is: E' Sec. 13, T6S, R17E; SE' Sec. 7,
	SW4 Sec. 8, entire Sec. 18, N2 Sec. 17, N2 Sec. 16, N2 Sec. 15, entire Sec. 14,
	NE% Sec. 23, and N 1 Sec. 24, T6S, R18E; and E 1 8 Sec. 19, T6s; R19E. All tributaries
	within the Primitive Area are also claimed.
4.	A total of 15.0 CFS(10,860 acre-feet/year) minimum flow is required to retain the
	aesthetic values for outdoor described and a second a second and a second a second and a second
	aesthetic values for outdoor recreation and maintain the ecosystem to meet the peeds (continued on the next page)
	を表現している。 1987年 - 1987年 - 19

of the fisheries, wildlife, and riparian habitat. Ten cubic feet per second; year long (7240 acre-feet) is claimed for wildlife and fisheries and five cubic feet per second(3620 acre feet) is additionally claimed for ecosystem maintenance and the aesthetic recreational values noted in 5H on this form. Several of the fish and wildlife species listed are on the threatened and endangered species list and all of the fish are unique native species not duplicated anywhere else in the southwest 2C. Application for Permit to Appropriate water will be filed with DWR by 5/11/1981 (if more space is required, attach separate sheet(s) STATE OF ARIZONA VERIFICATION County of Man U.S.D.I., Bureau of Land Management State Director (Claimant-Affiant representative's name) (please print Claimant-Affiant's name) being first duly sworn, deposes and says; That the affiant, or its duly authorized representative, possesses the knowledge and the authorization to execute this verification as to the correctness and truthfulness of the matters set forth in the "Statement of Claimant", except as to those matters alleged upon information and

belief, and as to those matters believes them to be true and correct.

Claimant-affiant signature

Claimant-affiant representative's signature

For Corporations, Partnerships,

Associations, etc.

Claimant-affiant signature

Attest:

Claimant-affiant representative's signature , ...

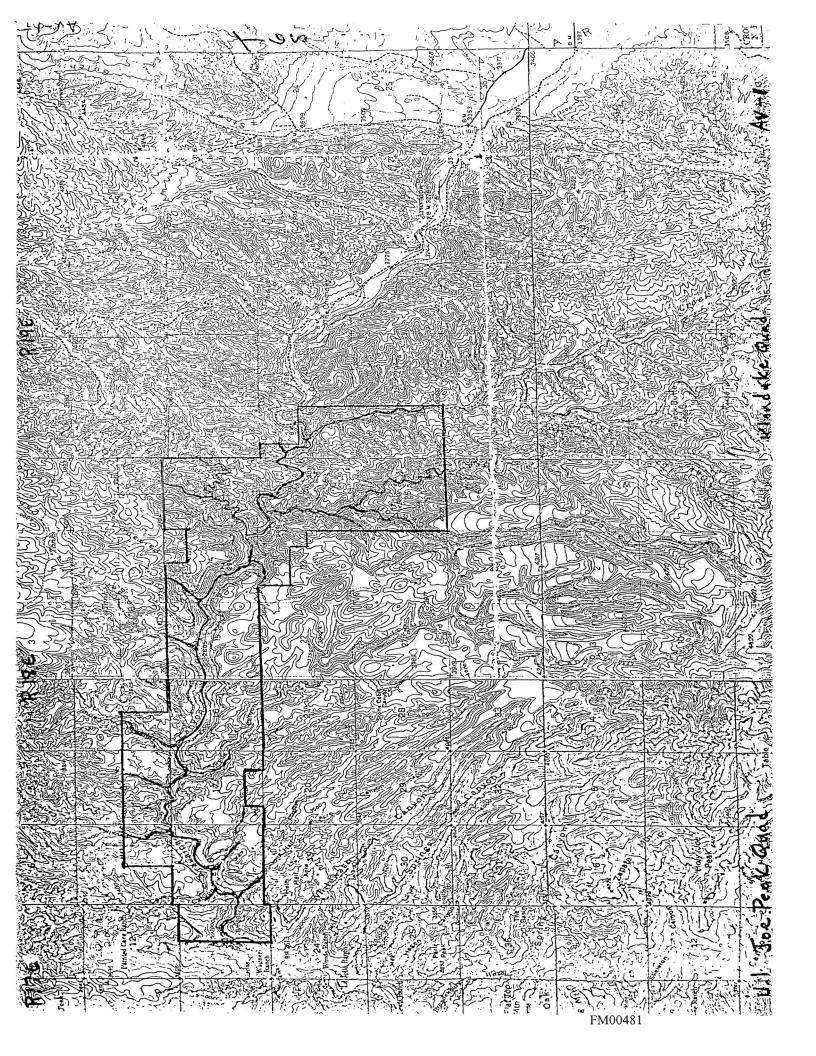
Subscribed and sworn to before me this

SEAL

JAN 4 1982 WATER RESOURCES

Notary Public or authorized Employee of the Arizona Water Commission

My Commission expires ma





United States Department of the Interior

BUREAU OF LAND MANAGEMENT SAFFORD DISTRICT OFFICE 425 E. 4th Street Safford, Arizona 85546 428-4040

May 10, 1985

Mr. George A. Schade, Jr. Branch Chief, Surface Water/Adjudication Department of Water Resources 99 East Virginia Avenue Phoenix, Arizona 85004

Dear Mr. Schade:

Delbert Molitor, representing Safford District of the Bureau of Land Management, submitted to you on May 5, 1984 a sum of money in the amount of \$1,780.00 for payment of 89 Statement of Claimant forms for water sources located within the San Pedro Watershed Basin. The money was in the form of a government check for the sum of \$1,680.00 and \$100.00 cash. This total sum of money was computed for the 89 claimant forms at the rate of \$20.00 per claim. Please remit a receipt for the payment.

The Department of Water Resources file numbers for the 89 claimant forms are:

39-1111156 through 39-1111243, in numerical sequence, and 39-1111090

Sincerely,

Lester K. Rosenkrance District Manager

UNITED STATES
DEPARTMENT of the INTERIOR
BUREAU of LAND MANAGEMENT
(SAFFORD DISTRICT OFFICE)
425 E. 4th STREET
SAFFORD AZ 85546

STATE OF ARIZONA DEPARTMENT OF WATER RESOURCES WATER RIGHTS ADMINISTRATION 99 EAST VIRGINIA PHOENIX, ARIZONA 85004

RECEIPT

KIND ENTRY	FILE REFERENCE NO.
39	11156
	THRU
39	11238 and

FUND I	ACCOUNT NO.		INT.			(39 11238 and	
SOURCE	AGENCY	CHAPTER	DIV.	ACCT.	ITEM DESCRIPTION	RATE	\$ AMOUNT
					Filing fee for Statement of Claimant		
					San Pedro River Adjudication		1,680.00
				1	(84 filings)	HAITER GUESTS	THYMEN?
			10			CHK NO GILA	355034° 1680.00
			2			TAX TOTI	0.00 1680.00
						ADJ.CHE	
				·		# 9333	9 - 11:27 2

Check #90,355,034 4/22/85 TOTAL \$ 1,680.00

fc